

## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER OF PATENTS AND TRADEMARKS
P.O. Box 1450
Alexandria, Vinginia 22313-1450
www.uspto.gov

	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
APPLICATION NO.	FILING DATE	John M. Garrett	1600.65221	9752	
09/782,618	02/13/2001	John W. Garrett	1000105==-		
7	590 05/27/2003				
GREER, BURNS & CRAIN, LTD.			EXAMINER		
Suite 2500			WILLE, DOUGLAS A		
300 South Wacker Drive					
Chicago, IL 6	0606		ART UNIT	PAPER NUMBER	
			2814	2814	
			DATE MAILED: 05/27/2003	3	

Please find below and/or attached an Office communication concerning this application or proceeding.

## Interview Summary

Application No.

O9/782,618

Examiner

Douglas A Wille

Applicant(s)

GARRETT, JOHN M.

2814

	Douglas A vville	2014	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>Douglas A Wille</u> .	(3)		
(2) <u>Arik Ranson</u> .	(4)		
Date of Interview: 21 May 2003.			
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2) applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: 1.			
Identification of prior art discussed: Gotzenbrucker et al.			
Agreement with respect to the claims f)☐ was reached.	g)⊠ was not reached. h)□ f	N/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Applicant pointed out was prior art.</u>	al nature of what was agreed to here he feels that the claimed o	if an agreement <u>device was not s</u>	was <u>hown by the</u>
(A fuller description, if necessary, and a copy of the amen allowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attached	copy of the amendments that v	reed would rend would render the	er the claims claims
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN ONE MONTH FROM THIS INTERVIEW DATE TO INTERVIEW. See Summary of Record of Interview requires	le last Office action has alread FILE A STATEMENT OF THE	y been filed, APF SUBSTANCE (	LICANTIS
		•	<b>A</b>
	Kalego	est. Wi	lle

Examiner Note: You must sign this form unless it is an

Attachment to a signed Office action.

Examiner's signature, if required

He MlRez For Regard 14-25-23

PATENT APPLICATION

1600.65221

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE US PARO E & TRADERARK

Applicant:	John M. Garrett	Thereby certify that this paper is being deposited with the United States Postal Service as FIRST-CLASS mai
Serial No.:	09/782,618	for Patents, Washington, D.C. 20231, on this date.
Filed:	February 13, 2001	Date PECLASS WCM  Date Registration No. 43,5714
For:	SEMICONDUCTOR JUNCTION PROFILE AND METHOD FOR THE PRODUCTION THEREOF	Attorney for Applicant ) ) )
Art Unit:	2814	)
Examiner:	Wille, Douglas A.	)

## **REQUEST FOR A REFUND TO DEPOSIT ACCOUNT 07-2069**

**BOX 16 Assistant Commissioner for Patents** Washington, D.C. 20231

Sir:

This patent application was filed on February 13, 2001. The Patent Office issued a Restriction Requirement including an Office Action Summary (copy enclosed) indicating that claims 1-21 were subject to a restriction and/or election requirement. The Office Action Summary states that a Shortened Statutory Period for Reply was set to expire three months from the mailing date of the document as provided by 37 CFR 1.134. The Office Action was mailed on February 21, 2002, and Applicant filed a response (copy enclosed) on April 16, 2002, within the three-month expiration deadline of May 21, 2002.

However, \$110 was debited to Deposit Account No. 07-2069 on May 28, 2002 for a one-month extension fee. Since the discretionary Shortened Statutory Period for Reply was set to 3-months and Applicant properly responded within the specified three-month period, Applicant respectfully submit that the \$110 fee deducted from Deposit Account No. 07-2069 was in error.

Applicant therefore requests that a refund in the **total amount of \$110.00**, which reflects the aforementioned erroneous Deposit Account charges, be credited to Deposit Account No. 07-2069.

Should there be any questions regarding this Request for a Refund, please contact the undersigned attorney at the telephone number listed below.

Respectfully submitted,

GREER, BURNS & CRAIN, LTD.

als BR

Ву

Arik B. Ranson

Registration No. 43,874

January 23, 2003

300 South Wacker Drive 25th Floor Chicago, Illinois 60606 Tel.: (312) 360-0080

Fax: (312) 360-9315

F\DATA\WP60\1815\63808\REFUNDREQ.DOC